Application or Docket Number

PATENT APPLICATION - LE DETERMINATION RECORD
Effective October 1, 2001

10/088952

		CLAIMS AS	(Column 1) (Column 2)			mn 2)	SMALL ENTITY TYPE			OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS							R	ATE	FEE	1	RATE	FEE
FOR			NUMBER	FILED	NUMBER EXTRA		BAS	IC FEE		OR	BASIC FEE	891.
TOTAL CHARGEABLE CLAIMS			minus 20=		• l./		X	9=		OR	X\$18=	7/
INDEPENDENT CLAIMS			$\sim$	nus 3 =				42=		OR	X84=	10
MULTIPLE DEPENDENT CLAIM PRESENT						+1	40=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2						TC	TAL		OR	TOTAL	962	
	С	LAIMS AS A	MENDED	- PAR	TII						OTHER THAN	
		(Column 1)		(Colu		(Column 3)	SM	IALL	ENTITY	OR	SMALL	ENTITY
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	P.	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	. 24	Minus	- 3	4	=	×s	9=		OR	X\$18=	靈
AME	Independent	• 2	Minus	***	3 CCLAIM		X4	12=		OR	X84=	
<b>L</b>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							40=		OR	+280=	
101	12/04							OTAL I. FEE		OR.	TOTAL ADDIT. FEE	
_	`	(Column 1)		(Colu		(Column 3)						'
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 24	Minus	-24		-5	X\$	9=		OR	X\$18=	90
AME	Independent	· 2	Minus	*** /	3	= /	X4	2=		OR	X84=	
<u> </u>	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	EINDEIN	CLAIM		+14	40=		OR	+280=	
	11160	5				·	ADDI	OTAL I. FEE		OR	TOTAL ADDIT FEE	90
	Willow.	(Column 1)		(Colu	mn 2)	(Column 3)						
ENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	PA	TE	ADDI- TIONAL FEE	*	RATE	ADDI- TIONAL FEE
NON	Total	. 28	M:nus	- 2	9		×\$	9=		OR	X\$18=	
AMENDMENT	Independent	NTATION OF MI	Minus	***	3 T CLAIM		X4	2=		OR	X84=	
L	PINST PRESE	NIATION OF MA	JETH CE DET	CHOCH	004111		+14	40=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  ADDIT. FEE												
**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1												

THE TO AMONUTE AL	Complete if Known				
FEE TRANSMITTAL	Application Number	10/088,952 March 22, 2002			
ឃុះ 2 2005	Filing Date				
wi(2 2 2004) 91 1 1 2003	First Named Inventor	Leppla, Stephen Brandon J. Fetterolf 1642			
Effective 100/2004. Patent fees are subject to annual revision.	Examiner Name				
Cant claims small entity status. See 37 CFR 1.27	Art Unit				
TOTAL AMOUNT OF PAYMENT (\$) 110	Attorney Docket No.	015280-405100US			

TOTAL AMOUNT OF PAYMENT (5) 110	Attorne	by Docket	NO.	013200	-1031000	<del></del>	
METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)						
Check Credit Card Money Order Other None	3. ADDITIONAL FEES						
Deposit Account:	Large	Entity	Small	Entity			
Deposit Account 20-1430	Fee Code	Fee (\$)	Fee Code	Fee (\$)	F	ee Description	Fee Paid
Number	1051	130	2051	65	Surcharge - I	ate filing fee or oath	$\square$
Deposit	1052	50	2052	25	Surcharge - I: cover sheet.	ste provisional filing fee or	
Account Name Townsend and Townsend and Crew LLP	1053	130	1053	130	Non-English:	specification	
The Director is authorized to: (check all that apply)	1812	2,520	1812	2,520	For filing a re- reexamination	quest for ex parte	
Charge fee(s) indicated below Credit any overpayments Charge any additional fee(s) or any underpayment of fee(s)	1804	920*	1804	920*	Requesting p Examiner act		
Charge lee(s) indicated below, except for the filing fee	1805	1,840*	1805	1,840*	Requesting p Examiner act		
to the above-identified deposit account.	1251	110	2251	55 ·	Extension for	reply within first month	110
FEE CALCULATION	1252	430	2252	215	Extension for	reply within second month	
1. BASIC FILING FEE Large Entity Small Entity	1253	980	2253	490	Extension for	reply within third month	$\vdash$
Large Entity Small Entity  Fee Fee Fee Fee Description Fee Paid	1254	1,530	2254	765		reply within fourth month	$\vdash$
Code (\$) Code (\$)	1.204	1,555					
1001 790 2001 395 Utility Ring fee	1255	2,080	2255	1,040	Extension for	reply within lifth month	
1002 350 2002 175 Design filing fee	1401	340	2401	170	Notice of App	•	
1003 550 2003 275 Plant filing fee	1402	340	2402	170		n support of an appeal	$\square$
1004 790 2004 395 Reissue füng fee	1403	300	2403	150	Request for o		$\vdash$
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to ins proceeding	litute a public use	
SUBTOTAL (1) (S)	1452	110	2452	55	Petition to rev	ive – unavoidable	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1453	1,330	2453	665	Petition to rev	ive - unintentional	
Fee from	1501	1,370	2501	685	Utility issue fe	e (or reissue)	Ш
Extra Claims below Fee Paid	1502	490	2502	245	Design issue	fee	
Total Claims -" = X =	1503	660	2503	330	Plant issue fe		$\Box$
andependent	1460	130	1460	130		e Commissioner	$\sqcup$
Claims = X =	1807	50	1807	50		e under 37 CFR 1.17(q)	-
Multiple	. 1806	180	1806	180	Submission of Stirrt	f Information Disclosure	
Dependent 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	8021	40	8021	40		ch patent assignment per is number of properties)	
Fee Fee Fee Fee Fee Description Code (5) Code (5)	1809	790	2809	395	Filing a subm (37 CFR § 1.	ission after final rejection 129(a))	
1202 18 2202 9 Claims in excess of 20	1810	790	2810	395		tional invention to be CFR § 1.129(b))	
1201 88 2201 44 Independent claims in excess of 3 1203 300 2203 150 Multiple dependent claim, if not paid	1801	790	2801	395	-	continued Examination	
1204 88 2204 44 "Reissue independent claims over original paters	1802	900	1802	800	•	xpedited examination polication	
1205 18 2205 9 "Reissue claims in excess of 20 and over original patent	Other fe	Other fee (specify)					
SUBTOTAL (2) (3) "or number previously paid, if greater, For Reissues, see above	*Reduci	ed by Basi	c Filling f	ee Phid	SUBTOTAL (3	(\$)110	
Of regimes previously part, a greater, nor reasones, see above	ــــا-			688			
SUBMITTED BY		<del></del> ,		<del>- 8</del> -	Com	plete (il applicable)	
Name (Print/Type) Carol A. Fang Registration No. (Attor	ney/Agent)	48.	631	Te	lephone	415-576-0200	
Signature (ne.1)	,			01430	1	October 19, 2004	
WARNING: Information on this form may become p	ublic. Cr	edit card fi	nformat		not be		
WARNING: Information on this form may become p included on this form. Provide credit care information	ilon and a	uthorizatio	on on P	గించ్రిక్లు. క	5		

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